

107TH CONGRESS  
2D SESSION

# H. R. 5078

To increase the number of well-trained mental health service professionals (including those based in schools) providing clinical mental health care to children and adolescents, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

JULY 9, 2002

Mr. KENNEDY of Rhode Island (for himself, Ms. ROS-LEHTINEN, Ms. KAPTUR, Mr. SERRANO, Ms. MILLENDER-McDONALD, Ms. RIVERS, Mr. OWENS, Mr. FROST, Mr. STARK, Mr. CONYERS, Mr. HOLT, Mr. LANTOS, Mr. DEUTSCH, Mr. BALDACCI, Ms. LEE, and Mr. DEFazio) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To increase the number of well-trained mental health service professionals (including those based in schools) providing clinical mental health care to children and adolescents, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Children’s Mental  
5 Health Service Expansion Act”.

1 **SEC. 2. FINDINGS.**

2 The Congress finds the following:

3 (1) The Center for Mental Health Services esti-  
4 mates that 20 percent or 13,700,000 of the Nation's  
5 children and adolescents have a diagnosable mental  
6 disorder, and about  $\frac{2}{3}$  of these children and adoles-  
7 cents do not receive mental health care.

8 (2) According to "Mental Health: A Report of  
9 the Surgeon General" in 1999, there are approxi-  
10 mately 6,000,000 to 9,000,000 children and adoles-  
11 cents in the United States (accounting for 9 to 13  
12 percent of all children and adolescents in the United  
13 States) who meet the definition for having a serious  
14 emotional disturbance.

15 (3) According to the Center for Mental Health  
16 Services, approximately 5 to 9 percent of United  
17 States children and adolescents meet the definition  
18 for extreme functional impairment.

19 (4) According to the Surgeon General's Report,  
20 there are particularly acute shortages in the num-  
21 bers of mental health service professionals serving  
22 children and adolescents with serious emotional dis-  
23 orders.

24 (5) According to the National Center for Edu-  
25 cation Statistics in the Department of Education,  
26 there are approximately 513 students for each school

1 counselor in United States schools, which ratio is  
2 more than double the recommended ratio of 250 stu-  
3 dents for each school counselor.

4 (6) According to the Bureau of Health Profes-  
5 sions in 2000, the demand for the services of child  
6 and adolescent psychiatry is projected to increase by  
7 100 percent by 2020.

8 (7) The development and application of knowl-  
9 edge about the impact of disasters on children, ado-  
10 lescents, and their families has been impeded by crit-  
11 ical shortages of qualified researchers and practi-  
12 tioners specializing in this work.

13 (8) According to the Bureau of the Census, the  
14 population of children and adolescents in the United  
15 States under the age of 18 is projected to grow by  
16 more than 40 percent in the next 50 years from 70  
17 million to more than 100 million by 2050.

18 **SEC. 3. LOAN REPAYMENTS, SCHOLARSHIPS, AND GRANTS**  
19 **TO IMPROVE CHILD AND ADOLESCENT MEN-**  
20 **TAL HEALTH CARE.**

21 Part B of title VII of the Public Health Service Act  
22 (42 U.S.C. 293 et seq.) is amended by adding at the end  
23 the following:

1 **“SEC. 742. LOAN REPAYMENTS, SCHOLARSHIPS, AND**  
2 **GRANTS TO IMPROVE CHILD AND ADOLES-**  
3 **CENT MENTAL HEALTH CARE.**

4 “(a) LOAN REPAYMENTS FOR CHILD AND ADOLES-  
5 CENT MENTAL HEALTH SERVICE PROFESSIONALS.—

6 “(1) ESTABLISHMENT.—The Secretary, acting  
7 through the Administrator of the Health Resources  
8 and Services Administration, may establish a pro-  
9 gram of entering into contracts on a competitive  
10 basis with eligible individuals (as defined in para-  
11 graph (2)) under which—

12 “(A) the eligible individual agrees to be  
13 employed full-time for a specified period (which  
14 shall be at least 2 years) in providing mental  
15 health services to children and adolescents; and

16 “(B) the Secretary agrees to make, during  
17 the period of employment described in subpara-  
18 graph (A), partial or total payments on behalf  
19 of the individual on the principal and interest  
20 due on the undergraduate and graduate edu-  
21 cational loans of the eligible individual.

22 “(2) ELIGIBLE INDIVIDUAL.—For purposes of  
23 this section, the term ‘eligible individual’ means an  
24 individual who—

25 “(A) is receiving specialized training or  
26 clinical experience in child and adolescent men-

1 tal health in psychiatry, psychology, school psy-  
2 chology, psychiatric nursing, social work, school  
3 social work, marriage and family therapy,  
4 school counseling, or professional counseling  
5 and has less than 1 year remaining before com-  
6 pletion of such training or clinical experience;  
7 or

8 “(B)(i) has a license in a State to practice  
9 allopathic medicine, osteopathic medicine, psy-  
10 chology, school psychology, psychiatric nursing,  
11 social work, school social work, marriage and  
12 family therapy, school counseling, or profes-  
13 sional counseling; and

14 “(ii)(I) is a mental health service profes-  
15 sional who completed (but not before the end of  
16 the calendar year in which this Act is enacted)  
17 specialized training or clinical experience in  
18 child and adolescent mental health described in  
19 subparagraph (A); or

20 “(II) is a physician who graduated from  
21 (but not before the end of the calendar year in  
22 which this Act is enacted) an accredited child  
23 and adolescent psychiatry residency or fellow-  
24 ship program in the United States.

1           “(3)    ADDITIONAL    ELIGIBILITY    REQUIRE-  
2           MENTS.—The Secretary may not enter into a con-  
3           tract under this subsection with an eligible indi-  
4           vidual unless the individual—

5                   “(A) is a United States citizen or a perma-  
6                   nent legal United States resident; and

7                   “(B) if enrolled in a graduate program (in-  
8                   cluding a medical residency or fellowship), has  
9                   an acceptable level of academic standing (as de-  
10                  termined by the Secretary).

11           “(4)   PRIORITY.—In entering into contracts  
12           under this subsection, the Secretary shall give pri-  
13           ority to applicants who—

14                   “(A) are or will be working with high pri-  
15                   ority populations;

16                   “(B) have familiarity with evidence-based  
17                   methods in child and adolescent mental health  
18                   services;

19                   “(C) demonstrate financial need; and

20                   “(D) are or will be working in the publicly  
21                   funded sector.

22           “(5)   MEANINGFUL LOAN REPAYMENT.—If the  
23           Secretary determines that funds appropriated for a  
24           fiscal year to carry out this subsection are not suffi-  
25           cient to allow a meaningful loan repayment to all ex-

1       pected applicants, the Secretary shall limit the num-  
2       ber of contracts entered into under paragraph (1) to  
3       ensure that each such contract provides for a mean-  
4       ingful loan repayment.

5           “(6) AMOUNT.—

6               “(A) MAXIMUM.—For each year that an  
7       eligible individual agrees under a contract  
8       under paragraph (1) to be employed, the Sec-  
9       retary may agree under that contract to pay  
10      not more than \$35,000 on behalf of the indi-  
11      vidual.

12          “(B) CONSIDERATION.—In determining  
13      the amount of payments to be made on behalf  
14      of an eligible individual under a contract to be  
15      entered into under paragraph (1), the Secretary  
16      shall consider the eligible individual’s income  
17      and debt load.

18          “(7) APPLICABILITY OF CERTAIN PROVI-  
19      SIONS.—The provisions of sections 338E and 338F  
20      shall apply to the program established under para-  
21      graph (1) to the same extent and in the same man-  
22      ner as such provisions apply to the National Health  
23      Service Corps Loan Repayment Program established  
24      in subpart III of part D of title III.

1           “(8) AUTHORIZATION OF APPROPRIATIONS.—

2           There is authorized to be appropriated to carry out  
3           this subsection \$10,000,000 for each of fiscal years  
4           2003 through 2007.

5           “(b) SCHOLARSHIPS FOR STUDENTS STUDYING TO  
6           BECOME CHILD AND ADOLESCENT MENTAL HEALTH  
7           SERVICE PROFESSIONALS.—

8           “(1) ESTABLISHMENT.—The Secretary, acting  
9           through the Administrator of the Health Resources  
10          and Services Administration, may establish a pro-  
11          gram to award scholarships on a competitive basis to  
12          eligible students (as defined in paragraph (2)) who  
13          agree to enter into full-time employment (as de-  
14          scribed in paragraph (4)(C)) as a child and adoles-  
15          cent mental health service professional after gradua-  
16          tion or completion of a residency or fellowship.

17          “(2) ELIGIBLE STUDENT.—For purposes of  
18          this subsection, the term ‘eligible student’ means a  
19          United States citizen or a permanent legal United  
20          States resident who—

21                 “(A) is enrolled or accepted to be enrolled  
22                 in a graduate program that includes specialized  
23                 training or clinical experience in child and ado-  
24                 lescent mental health in psychology, school psy-  
25                 chology, psychiatric nursing, social work, school



1 social work, marriage and family therapy,  
2 school counseling, or professional counseling; or

3 “(B) is enrolled or accepted to be enrolled  
4 in an accredited graduate training program of  
5 allopathic or osteopathic medicine in the United  
6 States and intends to complete an accredited  
7 residency or fellowship in child and adolescent  
8 psychiatry.

9 “(3) PRIORITY.—In awarding scholarships  
10 under this subsection, the Secretary shall give—

11 “(A) highest priority to applicants who  
12 previously received a scholarship under this  
13 subsection and satisfy the criteria described in  
14 subparagraph (B); and

15 “(B) second highest priority to applicants  
16 who—

17 “(i) demonstrate a commitment to  
18 working with high priority populations;

19 “(ii) have familiarity with evidence-  
20 based methods in child and adolescent  
21 mental health services;

22 “(iii) demonstrate financial need; and

23 “(iv) are or will be working in the  
24 publicly funded sector.

1           “(4) REQUIREMENTS.—The Secretary may  
2           award a scholarship to an eligible student under this  
3           subsection only if the eligible student agrees—

4                   “(A) to complete any graduate training  
5                   program, internship, residency, or fellowship  
6                   applicable to that eligible student under para-  
7                   graph (2);

8                   “(B) to maintain an acceptable level of  
9                   academic standing (as determined by the Sec-  
10                  retary) during the completion of such graduate  
11                  training program, internship, residency, or fel-  
12                  lowship; and

13                  “(C) to be employed full-time after gradua-  
14                  tion or completion of a residency or fellowship,  
15                  for at least the number of years for which a  
16                  scholarship is received by the eligible student  
17                  under this subsection, in providing mental  
18                  health services to children and adolescents.

19           “(5) USE OF SCHOLARSHIP FUNDS.—A scholar-  
20           ship awarded to an eligible student for a school year  
21           under this subsection may be used only to pay for  
22           tuition expenses of the school year, other reasonable  
23           educational expenses (including fees, books, and lab-  
24           oratory expenses incurred by the eligible student in  
25           the school year), and reasonable living expenses, as

1 such tuition expenses, reasonable educational ex-  
2 penses, and reasonable living expenses are deter-  
3 mined by the Secretary.

4 “(6) AMOUNT.—The amount of a scholarship  
5 under this subsection shall not exceed the total  
6 amount of the tuition expenses, reasonable edu-  
7 cational expenses, and reasonable living expenses de-  
8 scribed in paragraph (5).

9 “(7) APPLICABILITY OF CERTAIN PROVI-  
10 SIONS.—The provisions of sections 338E and 338F  
11 shall apply to the program established under para-  
12 graph (1) to the same extent and in the same man-  
13 ner as such provisions apply to the National Health  
14 Service Corps Scholarship Program established in  
15 subpart III of part D of title III.

16 “(8) AUTHORIZATION OF APPROPRIATIONS.—  
17 There is authorized to be appropriated to carry out  
18 this subsection \$5,000,000 for each of fiscal years  
19 2003 through 2007.

20 “(c) CLINICAL TRAINING GRANTS FOR PROFES-  
21 SIONALS.—

22 “(1) ESTABLISHMENT.—The Secretary, acting  
23 through the Administrator of the Health Resources  
24 and Services Administration, in cooperation with the  
25 Administrator of the Substance Abuse and Mental

1 Health Services Administration, may establish a pro-  
2 gram to award grants on a competitive basis to ac-  
3 credited institutions of higher education to establish  
4 or expand internships or other field placement pro-  
5 grams for students receiving specialized training or  
6 clinical experience in child and adolescent mental  
7 health in psychiatry, psychology, school psychology,  
8 psychiatric nursing, social work, school social work,  
9 marriage and family therapy, school counseling, or  
10 professional counseling.

11 “(2) PRIORITY.—In awarding grants under this  
12 subsection, the Secretary shall give priority to appli-  
13 cants that—

14 “(A) have demonstrated the ability to col-  
15 lect data on the number of students trained in  
16 child and adolescent mental health and the pop-  
17 ulations served by such students after gradua-  
18 tion;

19 “(B) have demonstrated familiarity with  
20 evidence-based methods in child and adolescent  
21 mental health services; and

22 “(C) have programs designed to increase  
23 the number of professionals serving high pri-  
24 ority populations.

1           “(3) REQUIREMENTS.—The Secretary may  
2       award a grant to an applicant under this subsection  
3       only if the applicant agrees that—

4           “(A) any internship or other field place-  
5       ment program assisted under the grant will  
6       prioritize cultural competency;

7           “(B) students benefiting from any assist-  
8       ance under this subsection will be United States  
9       citizens or permanent legal United States resi-  
10      dents;

11          “(C) the institution will provide to the Sec-  
12      retary such data, assurances, and information  
13      as the Secretary may require; and

14          “(D) with respect to any violation of the  
15      agreement between the Secretary and the insti-  
16      tution, the institution will pay such liquidated  
17      damages as prescribed by the Secretary by reg-  
18      ulation.

19          “(4) APPLICATION.—The Secretary shall re-  
20      quire that any application for a grant under this  
21      subsection include a description of the applicant’s  
22      experience working with child and adolescent mental  
23      health issues.

24          “(5) AUTHORIZATION OF APPROPRIATIONS.—  
25      There is authorized to be appropriated to carry out

1       this subsection \$10,000,000 for each of fiscal years  
2       2003 through 2007.

3       “(d) PROGRESSIVE EDUCATION GRANTS FOR PARA-  
4 PROFESSIONALS.—

5               “(1) ESTABLISHMENT.—The Secretary, acting  
6       through the Administrator of the Health Resources  
7       and Services Administration, in cooperation with the  
8       Administrator of the Substance Abuse and Mental  
9       Health Services Administration, may establish a pro-  
10      gram to award grants on a competitive basis to  
11      State-licensed mental health nonprofit and for-profit  
12      organizations (including accredited institutions of  
13      higher education) to enable such organizations to  
14      pay for programs for preservice or in-service training  
15      of paraprofessional child and adolescent mental  
16      health workers.

17              “(2) DEFINITION.—For purposes of this sub-  
18      section, the term ‘paraprofessional child and adoles-  
19      cent mental health worker’ means an individual who  
20      is not a mental health service professional, but who  
21      works at the first stage of contact with children and  
22      families who are seeking mental health services.

23              “(3) PRIORITY.—In awarding grants under this  
24      subsection, the Secretary shall give priority to appli-  
25      cants that—

1           “(A) have demonstrated the ability to col-  
2           lect data on the number of paraprofessional  
3           child and adolescent mental health workers  
4           trained by the applicant and the populations  
5           served by these workers after the completion of  
6           the training;

7           “(B) have familiarity with evidence-based  
8           methods in child and adolescent mental health  
9           services; and

10           “(C) have programs designed to increase  
11           the number of paraprofessional child and ado-  
12           lescent mental health workers serving high pri-  
13           ority populations.

14           “(4) REQUIREMENTS.—The Secretary may  
15           award a grant to an organization under this sub-  
16           section only if the organization agrees that—

17           “(A) any training program assisted under  
18           the grant will prioritize cultural competency;

19           “(B) the organization will provide to the  
20           Secretary such data, assurances, and informa-  
21           tion as the Secretary may require; and

22           “(C) with respect to any violation of the  
23           agreement between the Secretary and the orga-  
24           nization, the organization will pay such liq-

1           undated damages as prescribed by the Secretary  
2           by regulation.

3           “(5) APPLICATION.—The Secretary shall re-  
4           quire that any application for a grant under this  
5           subsection include a description of the applicant’s  
6           experience working with paraprofessional child and  
7           adolescent mental health workers.

8           “(6) AUTHORIZATION OF APPROPRIATIONS.—  
9           There is authorized to be appropriated to carry out  
10          this subsection \$5,000,000 for each of fiscal years  
11          2003 through 2007.

12          “(e) CHILD AND ADOLESCENT MENTAL HEALTH  
13          PROGRAM DEVELOPMENT GRANTS.—

14               “(1) ESTABLISHMENT.—The Secretary, acting  
15               through the Administrator of the Health Resources  
16               and Services Administration, may establish a pro-  
17               gram to increase the number of well-trained child  
18               and adolescent mental health service professionals in  
19               the United States by awarding grants on a competi-  
20               tive basis to accredited institutions of higher edu-  
21               cation to enable the institutions to establish or ex-  
22               pand accredited graduate child and adolescent men-  
23               tal health programs.



1           “(2) PRIORITY.—In awarding grants under this  
2 subsection, the Secretary shall give priority to appli-  
3 cants that—

4           “(A) demonstrate familiarity with the use  
5 of evidence-based methods in child and adoles-  
6 cent mental health services;

7           “(B) provide experience in and collabora-  
8 tion with community-based child and adolescent  
9 mental health services;

10           “(C) have included normal child develop-  
11 ment curricula; and

12           “(D) demonstrate commitment to working  
13 with high priority populations.

14           “(3) USE OF FUNDS.—Funds received as a  
15 grant under this subsection may be used to establish  
16 or expand any accredited graduate child and adoles-  
17 cent mental health program in any manner deemed  
18 appropriate by the Secretary, including by improving  
19 the coursework, related field placements, or faculty  
20 of such program.

21           “(4) REQUIREMENTS.—The Secretary may  
22 award a grant to an accredited institution of higher  
23 education under this subsection only if the institu-  
24 tion agrees that—

1           “(A) any child and adolescent mental  
2 health program assisted under the grant will  
3 prioritize cultural competency;

4           “(B) the institution will provide to the Sec-  
5 retary such data, assurances, and information  
6 as the Secretary may require; and

7           “(C) with respect to any violation of the  
8 agreement between the Secretary and the insti-  
9 tution, the institution will pay such liquidated  
10 damages as prescribed by the Secretary by reg-  
11 ulation.

12           “(5) AUTHORIZATION OF APPROPRIATIONS.—  
13 There is authorized to be appropriated to carry out  
14 this subsection \$15,000,000 for each of fiscal years  
15 2003 through 2007.

16           “(f) DEFINITIONS.—In this section:

17           “(1) SPECIALIZED TRAINING OR CLINICAL EX-  
18 PERIENCE IN CHILD AND ADOLESCENT MENTAL  
19 HEALTH.—The term ‘specialized training or clinical  
20 experience in child and adolescent mental health’  
21 means training and clinical experience that—

22           (A) is part of or occurs after completion of  
23 an accredited graduate program in the United  
24 States for training mental health service profes-  
25 sionals;

1 (B) consists of at least 500 hours of train-  
 2 ing or clinical experience in treating children  
 3 and adolescents; and

4 (C) is comprehensive, coordinated, develop-  
 5 mentally appropriate, and of high quality to ad-  
 6 dress the unique ethnic and cultural diversity of  
 7 the United States population.

8 “(2) HIGH PRIORITY POPULATION.—The term  
 9 ‘high priority population’ means a population that  
 10 has a high incidence of children and adolescents who  
 11 have serious emotional disturbances, are racial and  
 12 ethnic minorities, or live in urban or rural areas.

13 “(3) MENTAL HEALTH SERVICE PROFES-  
 14 SIONAL.—The term ‘mental health service profes-  
 15 sional’ means an individual with a graduate or post-  
 16 graduate degree from an accredited institution of  
 17 higher education in psychiatry, psychology, school  
 18 psychology, psychiatric nursing, social work, school  
 19 social work, marriage and family counseling, school  
 20 counseling, or professional counseling.”.

21 **SEC. 4. AMENDMENTS TO SOCIAL SECURITY ACT TO IM-**  
 22 **PROVE CHILD AND ADOLESCENT MENTAL**  
 23 **HEALTH CARE.**

24 (a) INCREASING NUMBER OF CHILD AND ADOLES-  
 25 CENT PSYCHIATRY RESIDENTS PERMITTED TO BE PAID

1 UNDER THE MEDICARE GRADUATE MEDICAL EDUCATION  
 2 PROGRAM.—Section 1886(h)(4)(F) of the Social Security  
 3 Act (42 U.S.C. 1395ww(h)(4)(F)) is amended by adding  
 4 at the end the following new clause:

5 “(iii) INCREASE ALLOWED FOR TRAIN-  
 6 ING IN CHILD AND ADOLESCENT PSYCHI-  
 7 ATRY.—In applying clause (i), there shall  
 8 not be taken into account such additional  
 9 number of full-time equivalent residents in  
 10 the field of allopathic or osteopathic medi-  
 11 cine who are residents or fellows in child  
 12 and adolescent psychiatry as the Secretary  
 13 determines reasonable to meet the need for  
 14 such physicians as demonstrated by the  
 15 1999 report of the Department of Health  
 16 and Human Services entitled ‘Mental  
 17 Health: A Report of the Surgeon Gen-  
 18 eral’.”.

19 (b) EXTENSION OF MEDICARE BOARD ELIGIBILITY  
 20 PERIOD FOR RESIDENTS AND FELLOWS IN CHILD AND  
 21 ADOLESCENT PSYCHIATRY.—

22 (1) IN GENERAL.—Section 1886(h)(5)(G) of  
 23 the Social Security Act (42 U.S.C.  
 24 1395ww(d)(5)(G)) is amended—

1 (A) in clause (i), by striking “or (v)” and  
 2 inserting “(v), or (vi)”; and

3 (B) by adding at the end the following new  
 4 clause:

5 “(vi) CHILD AND ADOLESCENT PSY-  
 6 CHIATRY TRAINING PROGRAMS.—In the  
 7 case of an individual enrolled in a child  
 8 and adolescent psychiatry residency or fel-  
 9 lowship program approved by the Sec-  
 10 retary, the period of board eligibility and  
 11 the initial residency period shall be the pe-  
 12 riod of board eligibility for the specialty of  
 13 general psychiatry, plus 2 years for the  
 14 subspecialty of child and adolescent psychi-  
 15 atry.”.

16 (2) EFFECTIVE DATE.—The amendments made  
 17 by paragraph (1) shall apply to residency training  
 18 years beginning on or after July 1, 2002.

19 **SEC. 5. CHILD MENTAL HEALTH PROFESSIONAL REPORT.**

20 (a) STUDY.—The Administrator of the Health Re-  
 21 sources and Services Administration (in this section re-  
 22 ferred to as the “Administrator”) shall study and make  
 23 findings and recommendations on the distribution and  
 24 need for child mental health service professionals, includ-  
 25 ing with respect to specialty certifications, practice charac-

1 teristics, professional licensure, practice types, locations,  
2 education, and training.

3 (b) DISAGGREGATION.—The results of the study re-  
4 quired by subsection (a) shall be disaggregated by State.

5 (c) REPORT.—Not later than 1 year after the date  
6 of the enactment of this Act, the Administrator shall sub-  
7 mit to the Congress and make publicly available a report  
8 on the study, findings, and recommendations required by  
9 subsection (a).

10 (d) REVISION.—Each year the Administrator shall  
11 revise the report required under subsection (c).

12 (e) AUTHORIZATION OF APPROPRIATIONS.—There  
13 are authorized to be appropriated to carry out this section  
14 such sums as may be necessary for each of fiscal years  
15 2003 through 2007.

16 **SEC. 6. REPORTS.**

17 (a) TRANSMISSION.—The Secretary of Health and  
18 Human Services shall transmit a report described in sub-  
19 section (b) to the Congress—

20 (1) not later than 3 years after the date of the  
21 enactment of this Act; and

22 (2) not later than 5 years after the date of the  
23 enactment of this Act.

1       (b) CONTENTS.—The reports transmitted to the Con-  
2 gress under subsection (a) shall each address the fol-  
3 lowing:

4           (1) The effectiveness of the amendments made  
5 by, and the programs carried out under, this Act in  
6 increasing the number of child and adolescent men-  
7 tal health service professionals and paraprofessional  
8 child and adolescent mental health workers.

9           (2) The demographics of the individuals served  
10 by such increased number of child and adolescent  
11 mental health service professionals and paraprofes-  
12 sional child and adolescent mental health workers.

○